Vinita HOSPITAL NABH CERTIFIED

General Bill - Cash

Bill No	:	**OP46218**	HR No	:	**18083**
Bill Date	:	**15-08-2026 02:00:57 PM**	Age/Sex	:	**64Y 1M / Female**
Patient Name	:	**Ms. PENCILAMMA**			

Description	Amount
Dr. Ranjiith G. Dhakshina	
1. BASIC (SELF CARE) PACKAGE	**999.00**
Total	**999.00**
Discount	**499.00**
Bill Amount	**500.00**

Received Amount	:	**Rs. 500.00**
Received Amount in Words	:	**Five hundred only**
Balance Amount	:	**Rs. 0.00**
Mode of Payment	:	**Cash**
Bill Location	:	**Vinita Hospital, Nungambakkam**

Jeevitha P
Authorized Signatories

This is a system-generated bill. Therefore, no seal or signature is required.